test Available Copy

| | PATENT A | APPLICATIO Effect | RD | RD 09 7/0, 6/8 | | | | | | | | |
|--|--|---|-----------------|-------------------------------|--------------|----------------------------------|----------|---------------|------------------------|------------------|----------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL EN | NTITY | OR | OTHER SMALL | |
| TOTAL CLAIMS | | | 98 | | | | | RATE | FEE | 1 | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | 7) minus 20= | | . 1 | | | X\$ 9= | | OR | X\$18= | 3600 |
| INDEPENDENT CLAIMS | | | minus 3 = | | · 0 | | | X40= | | OR | X80= | |
| ML | JLTIPLE DEPEN | IDENT CLAIM P | RESENT | | • | | | 105 | | | 070 | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | +135= | | OR | +270= | |
| | | | | | | | | TOTAL | | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | _ | SMALL | ENTITY | OR | OTHER SMALL I | | |
| AMENDMENT A | X | REMAINING NU AFTER PRE | | HIGH NUM PREVIO PAID | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 54 | Minus | 🚽 | 22 | =32 | | X\$ 9= | | OR | X\$18= | 576 |
| | Independent | · 5 | Minus ••• (| | <u>3</u> | = 2 | | X40= | | OR | X86= | 112 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | | +270= | |
| Clarke | | | | | | | Į | +135= | | OR | · TOTAL | 10.10 |
| | 4120105 | <i>)</i> | | | | | • | ADDIT. FEE | | OR, | ADDIT. FEE | 748 |
| | | (Column 1) CLAIMS | | (Colui | | (Column 3) |) r | | 4001 | 1 1 | · · · · | 1001 |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | :35 | Minus | 5 | 7 | = D | 1 | X\$ 9= | | OR | 2/2 | 1) |
| | Independent | . 5 | Minus | 1 |) | = (| 1 | X40= | | OR | | 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | OR | 300 | 17 |
| | • | | | | | | L | · TOTAL | | | TOTAL | 0 |
| | · | (Calumn 4) | | (Calina | C\ | (Caluma C) | A | ODIT. FEE | | JUN . | ADDIT. FEE | <i>y</i> |
| | | (Column 1) CLAIMS | | (Colur HIGH | | (Column 3) | 1 r | | 4001 | ı 1 | | 4001 |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | •• | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | • | Minus | ••• | | = |] | X40= | | | X80= | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | | |
| | I the entry in eather | mn 1 in loss than th | o onto in orbi | ann 0 | . 40° i= === | h 3 | | +135= | | OR | +270= | |
| TOTAL ADDIT. FEE OR HIGHEST Number Previously Paid For IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE | | | | | | | | | | | | |
| | The "Highest Num | mber Previously Pai ber Previously Pai | d For (Total or | o omace i Independ | ent) is the | n 3, enter "3." highest numbe | r four | nd in the app | ropriate box | in col | umn 1. | |